

Attachment A1—TDH Exposure Investigation Questionnaire

SCREENING QUESTIONNAIRE (ARSENIC)

If you would like to participate, please let us know by:

- completing this form and
- returning it to our office in the enclosed postage paid envelope
- before July 23, 2003

before July 23, 2003	(please print)			
I would like to participate in the Tex	xas Department of Health arsenic e	xposure in	vestigatio	n
Name: Mailing Address:				
Telephone No.:	Number of people living	Number of people living in your household:		
Survey Questions:				Don't
		Yes	No	Know
1. Do you drink faucet water?				
2. Do you cook with faucet water:	?			
3. Have you eaten seafood in the past 3 days?				
4. Have you eaten Chinese food in the past 3 days?				
5. Have you smoked in the last 3 da	nys?			
6. Do you garden or work in your y	ard?			
7. Have you recently used any pesti	icides or garden sprays?			
8. Have you eaten any vegetables g	rown in your garden?			
9. Have you worked with chemically treated (Wolmanized) wood?				
10. Is most of the water you drink fro a. Jim Hogg WCID#2 c. Bottled water e. Other water source.	om: (Please circle all that apply) b. Your own well d. Don't Know If so, what is the source?			
How long have you lived in the Hebbron What is your current occupation?				_